

## SUPPLEMENTAL APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Number:: 10/593,071  
Application Date:: 09/15/06  
Application Type:: **REGULAR**  
Subject Matter:: **UTILITY**  
CD-ROM or CD-R?:: **NONE**  
Title:: PEPTIDES DERIVED FROM HUMAN  
BPLP PROTEIN, POLYNUCLEOTIDES  
CODING FOR SAID PEPTIDES AND  
ANTIBODIES DIRECTED AGAINST  
SAID PEPTIDES  
Attorney Docket Number:: 296415US0PCT  
Total Drawing Sheets:: 12

### INVENTOR INFORMATION

Applicant Authority Type::	<b>INVENTOR</b>
Primary Citizenship Country::	France
Status::	<b>FULL CAPACITY</b>
Given Name::	Catherine
Family Name::	ROUGEOT
City of Residence::	Chevreuse
Country of Residence::	France
Street of Mailing Address::	Lieu dit de talou-39, Route de Choisel
City of Mailing Address::	Chevreuse
Country of Mailing Address::	France
Postal or Zip Code of Mailing Address::	78460
Applicant Authority Type::	<b>INVENTOR</b>
Primary Citizenship Country::	France
Status::	<b>FULL CAPACITY</b>
Given Name::	Jean-Francois
Family Name::	HUAULME
City of Residence::	<u>Paris</u>
Country of Residence::	France
Street of Mailing Address::	<u>125 Bis Rue de Picpus</u>
City of Mailing Address::	<u>Paris</u>
Country of Mailing Address::	France
Postal or Zip Code of Mailing Address::	<u>75012</u>

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	France
Status::	FULL CAPACITY
Given Name::	Marie-Noelle
Family Name::	UNGEHEUER
City of Residence::	Maurepas
Country of Residence::	France
Street of Mailing Address::	12 rue de Benodet
City of Mailing Address::	Maurepas
Country of Mailing Address::	France
Postal or Zip Code of Mailing Address::	78310
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	France
Status::	FULL CAPACITY
Given Name::	Anne
Family Name::	WISNER
City of Residence::	Cachan
Country of Residence::	France
Street of Mailing Address::	1 rue des deux freres
City of Mailing Address::	Cachan
Country of Mailing Address::	France
Postal or Zip Code of Mailing Address::	94230
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	France
Status::	FULL CAPACITY
Given Name::	Evelyne
Family Name::	DUFOUR
City of Residence::	Vanves
Country of Residence::	France
Street of Mailing Address::	12-14 rue J.B. Potin
City of Mailing Address::	Vanves
Country of Mailing Address::	France
Postal or Zip Code of Mailing Address::	92170

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

**DOMESTIC PRIORITY INFORMATION**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/IB05/00700	03/18/05

**FOREIGN PRIORITY INFORMATION**

Application Number:	Country::	Filing Date::	Priority Claimed::
04290754.3	Europe	03/19/04	YES

**ASSIGNMENT INFORMATION**

Assignee Name:: INSTITUT PASTEUR  
Street of Mailing Address:: 28, rue du Docteur Roux  
City of Mailing Address:: Paris Cedex 15  
Country of Mailing Address:: France  
Postal or Zip Code of Mailing Address:: 75724